

**OMB NO. 1110-0026**

**1. FFL NUMBER** *Note: 03 Licensees need not enroll:*

### 3. BUSINESS PHONE NUMBER

[illegible]

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4. LAST NAME

[illegible]

MI

CADENCE

[illegible]

7

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[illegible][illegible]

STATE

ZIP CODE

[illegible]

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LAST NAME

FIRST NAME

MI

CADENCE

[illegible][illegible]

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**9. BUSINESS FAX NUMBER (optional):**

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**FBI NICS E-Check Users Complete this Section**

**10. LAST NAME**

FIRST NAME

MI

CADENCE

[illegible][illegible]

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**12. E-MAIL ADDRESS:**

By executing this document and/or by the use of the above code word, the FFL acknowledges understanding of its obligations and responsibilities under the NICS (as detailed in the Gun Control Act of 1968, as amended and the Responsibilities of a Federal Firearms Licensee (FFL) under the National Instant Criminal Background Check System, dated October 7, 2002) and intent to honor those obligations and responsibilities. Intending to be legally bound, I hereby execute this acknowledgment on behalf of the above-mentioned FFL and certify under penalty of perjury that I have full authority from the FFL to make a legally binding commitment on its behalf.

**13. User/Applicant Signature:**

**Date executed:**

**14. FFL Witness:**

Date executed: \_\_\_\_\_